

[illegible]

Voluntary Petition <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): Gladys Esther Paoli	
Prior Bankruptcy Case Filed Within Last 8 Years (If more than one, attach additional sheet)			
Location Where Filed: NONE		Case Number:	Date Filed:
Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet)			
Name of Debtor: NONE		Case Number:	Date Filed:
District:		Relationship:	Judge:
<div style="text-align: center;"> Exhibit A </div> (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11) <input type="checkbox"/> Exhibit A is attached and made a part of this petition.		<div style="text-align: center;"> Exhibit B </div> (To be completed if debtor is an individual whose debts are primarily consumer debts) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by § 342(b) of the Bankruptcy Code. <div style="display: flex; justify-content: space-between;"> <div> X </div> <div> 3/21/2008 </div> </div> <div style="display: flex; justify-content: space-between;"> <div> Signature of Attorney for Debtor(s) James A. Kamide </div> <div> Date 6191608 </div> </div>	
<div style="text-align: center;"> Exhibit C </div> Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No		<div style="text-align: center;"> Certification Concerning Debt Counseling by Individual/Joint Debtor(s) </div> <input checked="" type="checkbox"/> I/we have received approved budget and credit counseling during the 180-day period preceding the filing of this petition. <input type="checkbox"/> I/we request a waiver of the requirement to obtain budget and credit counseling prior to filing based on exigent circumstances (Must attach certification describing.)	
Information Regarding the Debtor (Check the Applicable Boxes)			
Venue (Check any applicable box)			
<input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.			
<input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.			
<input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
Statement by a Debtor Who Resides as a Tenant of Residential Property <i>Check all applicable boxes.</i>			
<input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following). <div style="text-align: center;"> _____ (Name of landlord that obtained judgment) </div> <div style="text-align: center;"> _____ (Address of landlord) </div>			
<input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and			
<input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of this petition.			

Voluntary Petition (This page must be completed and filed in every case)		Name of Debtor(s): Gladys Esther Paoli	
Signatures			
Signature(s) of Debtor(s) (Individual/Joint) I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition]- I have obtained and read the notice required by § 342(b) of the Bankruptcy Code. I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. X s/ Gladys Esther Paoli Signature of Debtor Gladys Esther Paoli X Not Applicable Signature of Joint Debtor Telephone Number (If not represented by attorney) 3/21/2008 Date		Signature of a Foreign Representative of a Recognized Foreign Proceeding I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition. (Check only one box.) <input type="checkbox"/> I request relief in accordance with chapter 15 of Title 11, United States Code. Certified Copies of the documents required by § 1515 of title 11 are attached. <input type="checkbox"/> Pursuant to § 1511 of title 11, United States Code, I request relief in accordance with the Chapter of title 11 specified in the petition. A certified copy of the order granting recognition of the foreign proceeding is attached. X Not Applicable (Signature of Foreign Representative) (Printed Name of Foreign Representative) Date	
Signature of Attorney X Signature of Attorney for Debtor(s) James A. Kamide, 6191608 Printed Name of Attorney for Debtor(s) / Bar No. James A. Kamide Firm Name 8114 W. Grand Avenue River Grove, IL 60171 Address 708-453-5100 708-453-5248 Telephone Number 3/21/2008 Date		Signature of Non-Attorney Petition Preparer I declare under penalty of perjury that: 1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; 2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§110(b), 110(h), and 342(b); and, 3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. §110 setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19B is attached. Not Applicable Printed Name and title, if any, of Bankruptcy Petition Preparer Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. 110.) Address X Not Applicable Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above. Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual: If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person. <i>A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both 11 U.S.C. §110; 18 U.S.C. §156.</i>	
Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition. X Not Applicable Signature of Authorized Individual Printed Name of Authorized Individual Title of Authorized Individual Date			

FORM B6A
(10/05)

In re: Gladys Esther Paoli
Debtor

Case No. _____
(If known)

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a co-tenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
Total				0.00

(Report also on Summary of Schedules.)

In re **Gladys Esther Paoli**

Case No. _____

Debtor

(If known)

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "X" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." In providing the information requested in this schedule, do not include the name or address of a minor child. Simply state "a minor child."

TYPE OF PROPERTY	NONE	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand		cash		25.00
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	X			
3. Security deposits with public utilities, telephone companies, landlords, and others.	X			
4. Household goods and furnishings, including audio, video, and computer equipment.	X			
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.		clothes		25.00
7. Furs and jewelry.	X			
8. Firearms and sports, photographic, and other hobby equipment.	X			

Form B6B-Cont.
(10/05)

In re **Gladys Esther Paoli**

Case No. _____

Debtor

(If known)

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	NONE	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		Chicago Teachers' Union Term Life Insurance, \$25000 Optional Term Life, 2x Salary Dependent Term life, \$10,000 Dependent Term Life, \$10,000 Accidental Death 2x salary Long Term Disability 60% salary		0.00
10. Annuities. Itemize and name each issuer.	X			
	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give Particulars.		Chicago Teachers' Pension Fund Chicago, IL 60601		0.00
Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give Particulars.		ING IRA 2525 Cabot Dr., Ste 100 Lisle, IL 60532		2,730.45
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.		Harvey O. Smith owes to debtor for loan to get an apartment.		1,000.00
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			

Form B6B-Cont.
(10/05)

In re **Gladys Esther Paoli**

Case No. _____

Debtor

(If known)

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	NONE	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.	X			
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			

Form B6B-Cont.
(10/05)

In re Gladys Esther Paoli,
Debtor

Case No. _____
(If known)

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

TYPE OF PROPERTY	NONE	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
<u>3</u> continuation sheets attached				Total > \$ 3,780.45

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

Form B6C
(10/05)

In re Gladys Esther Paoli
Debtor

Case No. _____
(If known)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:
(Check one box)

☐ Check if debtor claims a homestead exemption that exceeds \$125,000.

☐ 11 U.S.C. § 522(b)(2)

☒ 11 U.S.C. § 522(b)(3)

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
cash	735 ILCS 5/12-1001(b)	25.00	25.00
Chicago Teachers' Pension Fund Chicago, IL 60601	§40 ILCS 5/17-151	0.00	0.00
Chicago Teachers' Union Term Life Insurance, \$25000 Optional Term Life, 2x Salary Dependent Term life, \$10,000 Dependent Term Life, \$10,000 Accidental Death 2x salary Long Term Disability 60% salary	§40 ILCS 5/17-151 735 ILCS 5/12-1006 215 ILCS 5/238	0.00 0.00 0.00	0.00
ING IRA 2525 Cabot Dr., Ste 100 Lisle, IL 60532	§40 ILCS 5/17-151	2,730.45	2,730.45

FORM B6D
(10/05)

In re: **Gladys Esther Paoli**
Debtor

Case No. _____
(If known)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☒ Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions, above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO.							
		VALUE					

0 Continuation sheets attached

Subtotal >
(Total of this page)
Total >
(Use only on last page)

\$0.00
\$0.00

(Report total also on Summary of Schedules)

Form B6E
(10/05)

In re Gladys Esther Paoli
Debtor

Case No. _____
(If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child." Do not include the name or address of a minor child in this schedule. See 11 U.S.C. § 112; Fed.R.Bankr.P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotal" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. If applicable, also report this total on the Means Test form.

☐ Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

☒ **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

☐ **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

☐ **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,000* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

☐ **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

☐ **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$4,925* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

Form B6E -Cont.
(10/05)

In re **Gladys Esther Paoli**
Debtor

Case No. _____
(If known)

☐ **Deposits by individuals**

Claims of individuals up to \$2,225* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

☐ **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

☐ **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

☐ **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amounts are subject to adjustment on April 1, 2007, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Form B6E -Cont.
(10/05)

In re Gladys Esther Paoli
Debtor

Case No. _____
(If known)

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

Type of Priority: Domestic Support Obligations

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM	AMOUNT ENTITLED TO PRIORITY
ACCOUNT NO. Harvey O. Smith 8642 Belden River Grove, IL 60171		01/03/2008 child support			X	300.00	0.00

\$300.00	\$0.00
\$300.00	\$0.00

Form B6F (10/05)

In re **Gladys Esther Paoli**
Debtor

Case No. _____
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R.Bankr.P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

☐ Check this box if debtor has no creditors holding unsecured nonpriority claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions, above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL
ACCOUNT NO. 372553115041004 American Express P.O. Box 0001 Los Angeles, CA 90096-0001 GC Services Limited Partnership 6330 Gultton Houston, TX		11/01/2007 purchases of goods and services				4,130.36
ACCOUNT NO. Arnold H. Landis 77 W. Washington St., Ste 702 Chicago, IL 60602		01/02/2008 legal services				16,646.48

☒ Continuation sheets attached

Subtotal ➤

Total ➤

(Use only on last page of the completed Schedule F.)

(Report also on Summary of Schedules)

\$20,776.84

Form B6F - Cont.
(10/05)

In re **Gladys Esther Paoli**
Debtor

Case No. _____
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions, above.)	CODEBTR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL
ACCOUNT NO.		01/03/2008 legal services				1.00
Beerman, Swerdlove, Woloshin, Barezky, Becker, Genin & London 161 N. Clark St., Suite 2600 Chicago, IL 60601 James M. Quigley, Beerman lawfirm Becker, Genin & London 161 N. Clark St., Suite 2600 Chicago, IL 60601 Tanya L. Akins, Beerman lawfirm Becker, Genin & London 161 N. Clark St., Suite 2600 Chicago, IL 60601						
ACCOUNT NO. 4034441447915602		11/01/2007 goods and services				5,866.35
Capital One P.O. Box 60024 City of Industry, CA 91716-0024 Capital One P.O. Box 30285 Salt Lake City, UT 84130-0285 Portfolio Recovery Associates LLC P.O. Box 12914 Norfolk, VA 23541						
ACCOUNT NO.		01/03/2008 medical bills from Gottlieb Mem Hosp				6,433.75
Chicago Public Schools Benefit Plan and Coghlan Kukankos, Attorneys 55 W. Wasker Dr., Ste 1210 Chicago, IL 60601						

Sheet no. 1 of 2 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page)

Total

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules)

\$12,301.10

Form B6F - Cont.
(10/05)

In re **Gladys Esther Paoli**
Debtor

Case No. _____
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions, above.)	CODEBTOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL
ACCOUNT NO. 07 M1 170596 Circuit Court of Cook County 50 W. Washington St, Room 601 Chicago, IL 60602 CASE NO: 07 M1 170596		01/03/2008 court services re: Citation to Discover Assets in Courtroom 1401 on March 24, 2008 at 9:30 a.m.			X	1.00
ACCOUNT NO. 5424180718797522 Citi Card P.O. Box 688914 Des Moines, IA 50368-8914 CITI Cards 7920 NW 110th St Kansas City, MO 64153		12/14/2007 goods and services				5,799.53
ACCOUNT NO. _____ Cook County Public Guardian 69 W. Washington St., Suite 700 Chicago, IL 60602 Margaret E. Curran, CC Public Guardian 69 W. Washington St., Suite 700 Chicago, IL 60602 David Blachek, CC Public Guardian 69 W. Washington St., Suite 700 Chicago, IL 60602		01/03/2008 legal services			X	1.00
ACCOUNT NO. _____ Diane-Carole Reporting 200 N. Dearborn Chicago, IL 60601		01/03/2008 court reporting services				1.00

Sheet no. 2 of 2 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page)

Total

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules)

\$5,802.53

Form B6F - Cont.
(10/05)

In re **Gladys Esther Paoli**
Debtor

Case No. _____
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions, above.)	CODEBATOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL
ACCOUNT NO.		01/03/2008				600.00
Donald Puchalski 111 W. Washington St., Ste 751 Chicago, IL 60602		legal services				
ACCOUNT NO.		01/03/2008				1.00
Dr. David Finn Associates in Human Development Couns 1500 Hicks Rd, Ste 300 Rolling Meadows, IL 60008		medical services				
ACCOUNT NO.		01/03/2008				2,000.00
Dr. John Palen 5225 Old Orchard Rd, Suite 1 Skokie, IL 60077		medical services				
ACCOUNT NO.		01/03/2008				1.00
Dr. Louis J. Kraus 456 Woodland Rd. Highland Park, IL 60035		medical services				
ACCOUNT NO.		01/03/2008				1,750.00
Dr. Paula R. Markowitz 1341 W. Fullerton #101 Chicago, IL 60614		medical services				

Sheet no. 3 of 7 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page)

Total

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules)

\$4,352.00

Form B6F - Cont.
(10/05)

In re **Gladys Esther Paoli**

Debtor

Case No. _____
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions, above.)	CODEBATOR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL
ACCOUNT NO.		01/18/2008 legal services			X	5,114.71
Elena M. Duarte, Attorney 5901 N. Cicero Ave Chicago, IL 60646						
Penny Slakowski, Attorney 5901 N. Cicero Chicago, IL 60646						
ACCOUNT NO. 726793207110C		01/03/2008 medical services for Kayla Paoli Smith				6,433.75
Gottlieb Memorial Hospital 701 W. North Avenue Melrose Park, IL 60160						
Gottlieb Memorial Hospital P.O. Box 74867 Chicgo, IL						
ACCOUNT NO.		01/03/2008 misc, re Dr. Palen's evaluation				2,000.00
Harvey O. Smith 8642 Belden River Grove, IL 60171						
ACCOUNT NO.		01/03/2008 legal services total paid \$84,580.20 Judgment for \$16,646.48 entered on 1-2-08 Circuit Court Cook County under case number 07 M1 170596			X	16,646.48
Herbert A. Gliberman and Associates 19 S. LaSalle, Ste 600 Chicago, IL 60603						
Arnold H. Landis, Attorney 77 W. Washington St, Ste 702 Chicago, IL 60602						
Stewart Russell, Attorney 805 W. Touhy Park Ridge, IL 60068						

Sheet no. 4 of 7 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page)

Total

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules)

\$30,194.94

Form B6F - Cont.
(10/05)

In re **Gladys Esther Paoli**
Debtor

Case No. _____
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions, above.)	CODEBTR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL
ACCOUNT NO. 6011380008343584 HSBC Direct Merchant Bank P.O. Box 17313 Baltimore, MD 21297-1313 HSBC Cardmembers Services P.O. Box 21055 Tulsa, OK 74121-1055		12/01/2007 goods and services				3,001.69
ACCOUNT NO. 5120255008824033 HSBC Orchard Bank Gold Mastercard P.O. Box 17051 Baltimore, MD 21297-1051 Redline Recovery Services, LLC 6201 Bonhomme St, Ste 100S Houston, TX 77036		11/01/2007 goods and services				354.61
ACCOUNT NO. 05-403 John M. Kennelly & Associates 1010 Lake Street, Ste 605 Oak Park, IL 60301 Bonded Collection Corp 29 East Madison St, Ste 1850 Chicago, IL 60602		01/03/2008 legal services			X	1,505.50
ACCOUNT NO. _____ Kamerlink, Stark, McCormack, Powers & Za 221 N. LaSalle St., Ste 1800 Chicago, IL 60601 Mary Beth Powres 221 N. LaSalle St., Ste 1800 Chicago, IL 60601		01/03/2008 legal services			X	18,562.78

Sheet no. 5 of 7 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page)

Total

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules)

\$23,424.58

Form B6F - Cont.
(10/05)

In re **Gladys Esther Paoli**
Debtor

Case No. _____
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions, above.)	CODEBTR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL
ACCOUNT NO.		01/03/2008				1,900.00
Laura Roman 3532 W. Melrose St. Chicago, IL 60618		loan				
ACCOUNT NO.		01/03/2008			X	745.31
Maria Jaffe & Associates Eight S. Michigan Ave., Ste 3200 Chicago, IL 60603		legal services total paid \$1500				
Mary Beth Powres 221 N. LaSalle St., Ste 1800 Chicago, IL 60601						
ACCOUNT NO.		01/03/2008			X	1.00
Paul Bargiel, Attorney 100 W. Monroe, Ste 902 Chicago, IL 60603		legal services				
ACCOUNT NO.		01/03/2008			X	62,337.00
Rafael R. Paoli 6984 W. Diversey Chicago, IL 60707		loans				
ACCOUNT NO.		01/03/2008				800.00
Rafael R. Paoli 6984 W. Diversey Chicago, IL 60707		Rent on apartment				

Sheet no. 6 of 7 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal
(Total of this page)

Total

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules)

\$65,783.31

Form B6F - Cont.
(10/05)

In re **Gladys Esther Paoli**
Debtor

Case No. _____
(If known)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions, above.)	CODEBTR HUSBAND, WIFE, JOINT OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL
ACCOUNT NO.		01/03/2008			X	1.00
Rinella & Rinella, Bernard Rinella 1 N. LaSalle St., Ste 3400 Chicago, IL 60602 Karen J. Bowers 1 N. LaSalle St., Ste 3400 Chicago, IL 60602 Lizzette Cervantes 1 N. LaSalle St., Ste 3400 Chicago, IL 60602		legal services				

Sheet no. 7 of 7 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal >
(Total of this page)

Total >

(Use only on last page of the completed Schedule F.)
(Report also on Summary of Schedules)

\$1.00
\$162,636.30

James A. Kamide 6191608
James A. Kamide
8114 W. Grand Avenue
River Grove, IL 60171

708-453-5100
Attorney for the Petitioner(s)

UNITED STATES BANKRUPTCY COURT
Northern District of Illinois

In Re:
Debtor: **Gladys Esther Paoli**
Social Security Number: **0798**

Case No:
Chapter **7**

Numbered Listing of Creditors

Creditor name and mailing address		Category of Claim	Amount of Claim
1.	Dr. John Palen 5225 Old Orchard Rd, Suite 1 Skokie, IL 60077	Unsecured Claims	\$ 2,000.00
2.	American Express P.O. Box 0001 Los Angeles, CA 90096-0001	Unsecured Claims	\$ 4,130.36
3.	Arnold H. Landis 77 W. Washington St., Ste 702 Chicago, IL 60602	Unsecured Claims	\$ 16,646.48
4.	Beerman, Swerdlove, Woloshin, Barezky, Becker, Genin & London 161 N. Clark St., Suite 2600 Chicago, IL 60601	Unsecured Claims	\$ 1.00
5.	Capital One P.O. Box 60024 City of Industry, CA 91716-0024	Unsecured Claims	\$ 5,866.35

In re: **Gladys Esther Paoli**

Case No. _____

6.	Chicago Public Schools Benefit Plan and Coghlan Kukankos, Attorneys 55 W. Wasker Dr., Ste 1210 Chicago, IL 60601	Unsecured Claims	\$ 6,433.75
7.	Circuit Court of Cook County 50 W. Washington St, Room 601 Chicago, IL 60602 CASE NO: 07 M1 170596	Unsecured Claims	\$ 1.00
8.	Citi Card P.O. Box 688914 Des Moines, IA 50368-8914	Unsecured Claims	\$ 5,799.53
9.	Cook County Public Guardian 69 W. Washington St., Suite 700 Chicago, IL 60602	Unsecured Claims	\$ 1.00
10.	Diane-Carole Reporting 200 N. Dearborn Chicago, IL 60601	Unsecured Claims	\$ 1.00
11.	Donald Puchalski 111 W. Washington St., Ste 751 Chicago, IL 60602	Unsecured Claims	\$ 600.00
12.	Dr. David Finn Associates in Human Development Couns 1500 Hicks Rd, Ste 300 Rolling Meadows, IL 60008	Unsecured Claims	\$ 1.00
13.	Dr. Louis J. Kraus 456 Woodland Rd. Highland Park, IL 60035	Unsecured Claims	\$ 1.00
14.	Dr. Paula R. Markowitz 1341 W. Fullerton #101 Chicago, IL 60614	Unsecured Claims	\$ 1,750.00

In re: **Gladys Esther Paoli**

Case No. _____

15.	Elena M. Duarte, Attorney 5901 N. Cicero Ave Chicago, IL 60646	Unsecured Claims	\$ 5,114.71
16.	Gottlieb Memorial Hospital 701 W. North Avenue Melrose Park, IL 60160	Unsecured Claims	\$ 6,433.75
17.	Harvey O. Smith 8642 Belden River Grove, IL 60171	Unsecured Claims	\$ 2,000.00
18.	Harvey O. Smith 8642 Belden River Grove, IL 60171	Priority Claims	\$ 300.00
19.	Herbert A. Gliberman and Associates 19 S. LaSalle, Ste 600 Chicago, IL 60603	Unsecured Claims	\$ 16,646.48
20.	HSBC Direct Merchant Bank P.O. Box 17313 Baltimore, MD 21297-1313	Unsecured Claims	\$ 3,001.69
21.	HSBC Orchard Bank Gold Mastercard P.O. Box 17051 Baltimore, MD 21297-1051	Unsecured Claims	\$ 354.61
22.	John M. Kennelly & Associates 1010 Lake Street, Ste 605 Oak Park, IL 60301	Unsecured Claims	\$ 1,505.50
23.	Kamerlink, Stark, McCormack, Powers & Za 221 N. LaSalle St., Ste 1800 Chicago, IL 60601	Unsecured Claims	\$ 18,562.78

In re: **Gladys Esther Paoli**

Case No. _____

24.	Laura Roman 3532 W. Melrose St. Chicago, IL 60618	Unsecured Claims	\$ 1,900.00
25.	Maria Jaffe & Associates Eight S. Michigan Ave., Ste 3200 Chicago, IL 60603	Unsecured Claims	\$ 745.31
26.	Paul Bargiel, Attorney 100 W. Monroe, Ste 902 Chicago, IL 60603	Unsecured Claims	\$ 1.00
27.	Rafael R. Paoli 6984 W. Diversey Chicago, IL 60707	Unsecured Claims	\$ 800.00
28.	Rafael R. Paoli 6984 W. Diversey Chicago, IL 60707	Unsecured Claims	\$ 62,337.00
29.	Rinella & Rinella, Bernard Rinella 1 N. LaSalle St., Ste 3400 Chicago, IL 60602	Unsecured Claims	\$ 1.00

In re: **Gladys Esther Paoli**

Case No. _____

(The penalty for making a false statement or concealing property is a fine up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. secs. 152 and 3571.)

DECLARATION

I, **Gladys Esther Paoli**, named as debtor in this case, declare under penalty of perjury that I have have read the foregoing Numbered Listing of Creditors, consisting of **4 sheets** (not including this declaration), and that it is true to the best of my information and belief.

Signature: **s/ Gladys Esther Paoli**
Gladys Esther Paoli

Dated: **3/21/2008**

Form B6G

(10/05)

In re: **Gladys Esther Paoli**

Debtor

Case No. _____

(If known)

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of these leases or contracts, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST, STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
Rafael R. Paoli 6984 W. Diversey Chicago, IL 60707	month to month apartment

Form B6H

(10/05)

In re: **Gladys Esther Paoli**

Debtor

Case No.

(If known)

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed. Bankr. P. 1007(m).

☒ Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
------------------------------	------------------------------

Form B6I
(10/05)

In re **Gladys Esther Paoli**

Case No. _____

Debtor

(If known)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 7, 11, 12 or 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child.

Debtor's Marital Status: divorced	DEPENDENTS OF DEBTOR AND SPOUSE	
	RELATIONSHIP daughter	AGE 6
Employment:	DEBTOR	SPOUSE
Occupation teacher		
Name of Employer Chicago Public Schools		
How long employed 9 years		
Address of Employer		

Income: (Estimate of average monthly income)

1. Current monthly gross wages, salary, and commissions
(Prorate if not paid monthly.)

DEBTOR	SPOUSE
\$ <u>4,649.00</u>	\$ _____

2. Estimate monthly overtime

\$ <u>0.00</u>	\$ _____
----------------	----------

3. SUBTOTAL

\$ <u>4,649.00</u>	\$ _____
--------------------	----------

4. LESS PAYROLL DEDUCTIONS

a. Payroll taxes and social security

\$ <u>1,102.00</u>	\$ _____
--------------------	----------

b. Insurance

\$ <u>194.96</u>	\$ _____
------------------	----------

c. Union dues

\$ <u>67.12</u>	\$ _____
-----------------	----------

d. Other (Specify)

Deferred Pay

\$ <u>1,451.88</u>	\$ _____
--------------------	----------

Life Insurance

\$ <u>91.00</u>	\$ _____
-----------------	----------

Pension

\$ <u>465.38</u>	\$ _____
------------------	----------

5. SUBTOTAL OF PAYROLL DEDUCTIONS

\$ <u>3,372.34</u>	\$ _____
--------------------	----------

6. TOTAL NET MONTHLY TAKE HOME PAY

\$ <u>1,276.66</u>	\$ _____
--------------------	----------

7. Regular income from operation of business or profession or farm
(Attach detailed statement)

\$ <u>0.00</u>	\$ _____
----------------	----------

8. Income from real property

\$ <u>0.00</u>	\$ _____
----------------	----------

9. Interest and dividends

\$ <u>0.00</u>	\$ _____
----------------	----------

10. Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above.

\$ <u>0.00</u>	\$ _____
----------------	----------

11. Social security or other government assistance
(Specify) _____

\$ <u>0.00</u>	\$ _____
----------------	----------

12. Pension or retirement income

\$ <u>0.00</u>	\$ _____
----------------	----------

13. Other monthly income

(Specify) _____

\$ <u>0.00</u>	\$ _____
----------------	----------

14. SUBTOTAL OF LINES 7 THROUGH 13

\$ <u>0.00</u>	\$ _____
----------------	----------

15. TOTAL MONTHLY INCOME (add amounts shown on lines 6 and 14)

\$ <u>1,276.66</u>	\$ _____
--------------------	----------

16. TOTAL COMBINED MONTHLY INCOME \$ 1,276.66

(Report also on Summary of Schedules)

17. Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document.:

Form B6I -Cont.
(10/05)

In re Gladys Esther Paoli
Debtor

Case No. _____
(If known)

SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

NONE

Form B6J
(10/05)

In re Gladys Esther Paoli,
Debtor

Case No. _____
(If known)

SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the average monthly expenses of the debtor and the debtor's family. Pro rate any payments made bi-weekly, quarterly, semi-annually, or annually to show monthly rate.

☐ Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a separate schedule of expenditures labeled "Spouse."

1. Rent or home mortgage payment (include lot rented for mobile home)	\$	<u>800.00</u>
a. Are real estate taxes included? Yes <u>✓</u> No _____		
b. Is property insurance included? Yes <u>✓</u> No _____		
2. Utilities: a. Electricity and heating fuel	\$	<u>75.00</u>
b. Water and sewer	\$	<u>0.00</u>
c. Telephone	\$	<u>250.00</u>
d. Other <u>assessment</u>	\$	<u>97.00</u>
3. Home maintenance (repairs and upkeep)	\$	<u>20.00</u>
4. Food	\$	<u>650.00</u>
5. Clothing	\$	<u>620.00</u>
6. Laundry and dry cleaning	\$	<u>150.00</u>
7. Medical and dental expenses	\$	<u>300.00</u>
8. Transportation (not including car payments)	\$	<u>185.00</u>
9. Recreation, clubs and entertainment, newspapers, magazines, etc.	\$	<u>100.00</u>
10. Charitable contributions	\$	<u>90.00</u>
11. Insurance (not deducted from wages or included in home mortgage payments)		
a. Homeowner's or renter's	\$	<u>0.00</u>
b. Life	\$	<u>0.00</u>
c. Health	\$	<u>0.00</u>
d. Auto	\$	<u>0.00</u>
e. Other <u>Ins deductible for debtor and daughter, Kayla</u>	\$	<u>33.00</u>
12. Taxes (not deducted from wages or included in home mortgage payments)		
(Specify) _____	\$	<u>0.00</u>
13. Installment payments: (In chapter 11, 12, and 13 cases, do not list payments to be included in the plan)		
a. Auto	\$	<u>0.00</u>
b. Other <u>Daughter, Kayla's, school expenses</u>	\$	<u>65.00</u>
<u>job related teacher materials</u>	\$	<u>125.00</u>
14. Alimony, maintenance or support paid to others	\$	<u>429.00</u>
15. Payments for support of additional dependents not living at your home	\$	<u>420.00</u>
16. Regular expenses from operation of business, profession, or farm (attach detailed statement)	\$	<u>0.00</u>
17. Other <u>computer software</u>	\$	<u>100.00</u>
<u>legal expenses re custody case</u>	\$	<u>1,000.00</u>
18. TOTAL MONTHLY EXPENSES (Report also on Summary of Schedules)	\$	<u>5,509.00</u>

19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:

legal fees related to appeal of custody decision going up, food and transportation costs are going up, college expenses for my son are going up, \$2500 for dental work coming soon

20. STATEMENT OF MONTHLY NET INCOME

a. Total monthly income from Line 16 of Schedule I	\$	<u>1,276.66</u>
b. Total monthly expenses from Line 18 above	\$	<u>5,509.00</u>
c. Monthly net income (a. minus b.)	\$	<u>-4,232.34</u>

Form B6
(10/05)

FORM 6. SCHEDULES

Summary of Schedules
Statistical Summary of Certain Liabilities

- | | | |
|------------|---|--|
| Schedule A | - | Real Property |
| Schedule B | - | Personal Property |
| Schedule C | - | Property Claimed as Exempt |
| Schedule D | - | Creditors Holding Secured Claims |
| Schedule E | - | Creditors Holding Unsecured Priority Claims |
| Schedule F | - | Creditors Holding Unsecured Nonpriority Claims |
| Schedule G | - | Executory Contracts and Unexpired Leases |
| Schedule H | - | Codebtors |
| Schedule I | - | Current Income of Individual Debtor(s) |
| Schedule J | - | Current Expenditures of Individual Debtor(s) |

Unsworn Declaration under Penalty of Perjury

GENERAL INSTRUCTIONS: The first page of the debtor's schedules and the first page of any amendments thereto must contain a caption as in Form 16B. Subsequent pages should be identified with the debtor's name and case number. If the schedules are filed with the petition, the case number should be left blank.

Schedules D, E, and F have been designed for the listing of each claim only once. Even when a claim is secured only in part or entitled to priority only in part, it still should be listed only once. A claim which is secured in whole or in part should be listed on Schedule D only, and a claim which is entitled to priority in whole or in part should be listed on Schedule E only. Do not list the same claim twice. If a creditor has more than one claim, such as claims arising from separate transactions, each claim should be scheduled separately.

Review the specific instructions for each schedule before completing the schedule.

Form 6- Summary
(10/05)

**United States Bankruptcy Court
Northern District of Illinois**

In re **Gladys Esther Paoli**,
Debtor

Case No. _____
Chapter **7**

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities."

AMOUNTS SCHEDULED

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	YES	1	\$ 0.00		
B - Personal Property	YES	4	\$ 3,780.45		
C - Property Claimed as Exempt	YES	1			
D - Creditors Holding Secured Claims	YES	1		\$ 0.00	
E - Creditors Holding Unsecured Priority Claims	YES	3		\$ 300.00	
F - Creditors Holding Unsecured Nonpriority Claims	YES	8		\$ 162,636.30	
G - Executory Contracts and Unexpired Leases	YES	1			
H - Codebtors	YES	1			
I - Current Income of Individual Debtor(s)	YES	2			\$ 1,276.66
J - Current Expenditures of Individual Debtor(s)	YES	1			\$ 5,509.00
Total			\$ 3,780.45	\$ 162,936.30	

Official Form 6 - Decl.
(10/05)

In re Gladys Esther Paoli
Debtor

Case No. _____
(If known)

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 24
(Total shown on summary page plus 1.)
sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date: 3/21/2008

Signature: s/ Gladys Esther Paoli
Gladys Esther Paoli

[If joint case, both spouses must sign]

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

(NOT APPLICABLE)

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS

IN RE

Gladys Esther Paoli

Debtor(s)

)
)
)
)
)Chapter **7**

Bankruptcy Case No.

DECLARATION REGARDING ELECTRONIC FILING

Signed by Debtor(s) or Corporate Representative

To Be Used When Filing over the InternetPART I - DECLARATION OF
PETITIONER

Date: _____

A. To be completed in all cases.

I **Gladys Esther Paoli**, the undersigned debtor, corporate officer, partner, or member, hereby declare under penalty of perjury that the information I have given my attorney, including correct social security number and the information provided in the electronically filed petition, statements, schedules, and if applicable, application to pay filing fee in installments, is true and correct. I consent to my attorney sending the petition, statements, schedules, and this DECLARATION to the United States Bankruptcy Court. I understand that this DECLARATION must be filed with the Clerk in addition to the petition. I understand that failure to file this DECLARATION will cause this case to be dismissed pursuant to 11 U.S.C. sections 707(a) and 105.

B. To be checked and applicable only if the petitioner is an individual (or individuals) whose debts are primarily consumer debts and who has (or have) chosen to file under chapter 7.

☒ I am aware that I may proceed under chapter 7, 11, 12, or 13 of Title 11 United States Code; I understand the relief available under each such chapter; I choose to proceed under chapter 7; and I request relief in accordance with chapter 7.

C. To be checked and applicable only if the petition is a corporation, partnership, or limited liability entity.

☐ I declare under penalty of perjury that the information provided in this petition is true and correct and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter specified in the petition.

Signature: **s/ Gladys Esther Paoli**

(Debtor or Corporate Officer, Partner or Member)

Form 7
(10/05)

UNITED STATES BANKRUPTCY COURT
Northern District of Illinois

In re: **Gladys Esther Paoli**

Debtor

Case No. _____

(If known)

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. Do not include the name or address of a minor child in this statement. Indicate payments, transfers and the like to minor children by stating "a minor child." See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 -25. **If the answer to an applicable question is "None," mark the box labeled "None"** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within the six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed [full-time or part-time]. An individual debtor also [may be] "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

1. Income from employment or operation of business

None ☐ State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT

SOURCE

FISCAL YEAR PERIOD

55,934.00

Chiago Public Schools

2006

55,794.12

Chicago Public Schools

2007

Form 7-Cont.
(10/05)

2. Income other than from employment or operation of business

None
☒

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE	FISCAL YEAR PERIOD
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3. Payments to creditors

Complete a. or b., as appropriate, and c.

None
☒

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
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None
☒

b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$5,000. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS/ TRANSFERS	AMOUNT PAID OR VALUE OF TRANSFERS	AMOUNT STILL OWING
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None
☒

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
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Form 7-Cont.
(10/05)

4. Suits and administrative proceedings, executions, garnishments and attachments

None
☐

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
Harvey Ordell Smith v Gladys Esther Paoli 04 D 12353	Divorce	Circuit Court Cook Co, Appellate Court Daley Center 50 W. Washington, Chicago, IL 60602	post decree, appeal
Herbert Gliberman v. Gladys E. Paoli 07 M1 170596	attorney fee collection case	Circuit Court of Cook County Daley Center 50 W. Washington, Chicago, IL 60602	Judgment entered 1-2-08 for \$16,646.48

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None
☐

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY
Herbert A. Gliberman and Associates 19 S. LaSalle, Ste 600 Chicago, IL 60603	03/07/2008	Citation to Discover Assets and Injunction.

5. Repossessions, foreclosures and returns

None
☒

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSSESSION, FORECLOSURE SALE TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
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Form 7-Cont.
(10/05)

6. Assignments and receiverships

None
☒

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE	DATE OF ASSIGNMENT	TERMS OF ASSIGNMENT OR SETTLEMENT
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b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None
☒

NAME AND ADDRESS OF CUSTODIAN	NAME AND ADDRESS OF COURT CASE TITLE & NUMBER	DATE OF ORDER	DESCRIPTION AND VALUE OF PROPERTY
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7. Gifts

None
☐

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
St. Priscilla School-Church	daughter's school	01/01/2008	\$42 required gift per month

8. Losses

None
☒

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case**. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
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Form 7-Cont.
(10/05)

9. Payments related to debt counseling or bankruptcy

None
☒

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYOR IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
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10. Other transfers

None
☒

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
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None
☒

b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE	DATE(S) OF TRANSFER(S)	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY
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11. Closed financial accounts

None
☒

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
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Form 7-Cont.
(10/05)

12. Safe deposit boxes

None



List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
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13. Setoffs

None



List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
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14. Property held for another person

None



List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
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15. Prior address of debtor

None



If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
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16. Spouses and Former Spouses

None



If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

Form 7-Cont.
(10/05)

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

None



SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

None



SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

None



NAME AND ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER	STATUS OR DISPOSITION
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Form 7-Cont.
(10/05)

18. Nature, location and name of business

None



a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within the **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the business, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the **six years** immediately preceding the commencement of this case.

NAME	LAST FOUR DIGITS OF SOC. SEC. NO./ COMPLETE EIN OR OTHER TAXPAYER I.D. NO.	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
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b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

None



NAME	ADDRESS
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* * * * *

[if completed by an individual or individual and spouse]

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date 3/21/2008

Signature of Debtor s/ Gladys Esther Paoli
Gladys Esther Paoli

Form 8
(10/05)

**UNITED STATES BANKRUPTCY COURT
Northern District of Illinois**

In re: **Gladys Esther Paoli**
Debtor

Case No. _____
Chapter **7**

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

- ☒ I have filed a schedule of assets and liabilities which includes debts secured by property of the estate.
- ☒ I have filed a schedule of executory contracts and unexpired leases which includes personal property subject to an unexpired lease.
- ☒ I intend to do the following with respect to the property of the estate which secures those debts or is subject to a lease:

Description of Secured Property	Creditor's Name	Property will be Surrendered	Property is claimed as exempt	Property will be redeemed pursuant to 11 U.S.C. § 722	Debt will be reaffirmed pursuant to 11 U.S.C. § 524(c)
1. purchases of goods and services	American Express				
2. legal services	Arnold H. Landis				
3. legal services	Beerman, Swerdlove, Woloshin, Barezky,				
4. goods and services	Capital One				
5. medical bills from Gottlieb Mem Hosp	Chicago Public Schools Benefit Plan				
6. court services re: Citation to Discover Assets in Courtroom 1401 on March 24, 2008 at 9:30 a.m.	Circuit Court of Cook County				
7. goods and services	Citi Card				
8. legal services	Cook County Public Guardian				
9. court reporting services	Diane-Carole Reporting				
10. legal services	Donald Puchalski				
11. medical services	Dr. David Finn				
12. medical services	Dr. John Palen				
13. medical services	Dr. Louis J. Kraus				
14. medical services	Dr. Paula R. Markowitz				
15. legal services	Elena M. Duarte, Attorney				
16. medical services for Kayla Paoli Smith	Gottlieb Memorial Hospital				
17. misc, re Dr. Palen's evaluation	Harvey O. Smith				
18. child support	Harvey O. Smith				

Form 8-Cont.
(10/05)

19. legal services total paid \$84,580.20 Judgment for \$16,646.48 entered on 1-2-08 Circuit Court Cook County under case number 07 M1 170596	Herbert A. Glieberman and Associates				
20. goods and services	HSBC Direct Merchant Bank				
21. goods and services	HSBC Orchard Bank Gold Mastercard				
22. legal services	John M. Kennelly & Associates				
23. legal services	Kamerlink, Stark, McCormack, Powers & Za				
24. loan	Laura Roman				
25. legal services total paid \$1500	Maria Jaffe & Associates				
26. legal services	Paul Bargiel, Attorney				
27. Rent on apartment	Rafael R. Paoli				
28. loans	Rafael R. Paoli				
29. legal services	Rinella & Rinella, Bernard Rinella				

Description of Leased Property	Lessor's Name	Lease will be assumed pursuant to 11 U.S.C. § 362(h)(1)(A)
1. month to month apartment	Rafael R. Paoli	X

Date: 3/21/2008

s/ Gladys Esther Paoli
Signature of Debtor

Form B22A (Chapter 7) (10/05)

In re **Gladys Esther Paoli**
Debtor(s)

Case Number: _____
(If known)

According to the calculations required by this statement:

☐ The presumption arises

☒ The presumption does not arise

(Check the box as directed in Parts I, III, and VI of this statement.)

STATEMENT OF CURRENT MONTHLY INCOME AND MEANS TEST CALCULATION
FOR USE IN CHAPTER 7 ONLY

In addition to Schedule I and J, this statement must be completed by every individual Chapter 7 debtor, whether or not filing jointly, whose debts are primarily consumer debts. Joint debtors may complete one statement only.

Part I. EXCLUSION FOR DISABLED VETERANS

1

If you are a disabled veteran described in the Veteran's Declaration in this Part I, (1) check the box at the beginning of the Veteran's Declaration, (2) check the "Presumption does not arise" box at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.

☐ **Veteran's Declaration.** By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. § 901(1)).

Part II. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(7) EXCLUSION

2

Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed.

a. ☒ Unmarried. **Complete only Column A ("Debtor's Income") for Lines 3-11.**

b. ☐ Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code." **Complete only Column A ("Debtor's Income") for Lines 3-11.**

c. ☐ Married, not filing jointly, without the declaration of separate households set out in line 2.b above. **Complete both Column A ("Debtor's Income") and Column B (Spouse's Income) for Lines 3-11.**

d. ☐ Married, filing jointly. **Complete both Column A ("Debtor's Income") and Column B (Spouse's Income) for Lines 3-11.**

All figures must reflect average monthly income for the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If you received different amounts of income during these six months, you must total the amounts received during the six months, divide this total by six, and enter the result on the appropriate line.

COLUMN A DEBTOR'S INCOME	COLUMN B SPOUSE'S INCOME
--------------------------------	--------------------------------

3

Gross wages, salary, tips, bonuses, overtime, commissions.

\$4,649.00

\$

4

Income from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference on Line 4. Do not enter a number less than zero. **Do not include any part of the business expenses entered on Line b as a deduction in Part V.**

a.	Gross Receipts	\$ 0.00
b.	Ordinary and necessary business expenses	\$ 0.00
c.	Business income	Subtract Line b from Line a

\$0.00

\$

5

Rent and other real property income. Subtract Line b from Line a and enter the difference on Line 4. Do not enter a number less than zero. **Do not include any part of the operating expenses entered on Line b as a deduction in Part V.**

a.	Gross Receipts	\$ 0.00
b.	Ordinary and necessary operating expenses	\$ 0.00
c.	Rental income	Subtract Line b from Line a

\$0.00

\$

6

Interest, dividends, and royalties.

\$0.00

\$

7

Pension and retirement income.

\$0.00

\$

8

Regular contributions to the household expenses of the debtor or the debtor's dependents, including child or spousal support. Do not include contributions from the debtor's spouse if Column B is completed.

\$0.00

\$

9	Unemployment compensation. Enter the amount in Column A and, if applicable, Column B. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below: <table border="1"> <tr> <td>Unemployment compensation claimed to be a benefit under the Social Security Act</td> <td>Debtor \$ _____</td> <td>Spouse \$ _____</td> </tr> </table>	Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor \$ _____	Spouse \$ _____	\$	\$
Unemployment compensation claimed to be a benefit under the Social Security Act	Debtor \$ _____	Spouse \$ _____				
10	Income from all other sources. If necessary, list additional sources on a separate page. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism. Specify source and amount. <table border="1"> <tr> <td>a.</td> <td>_____</td> <td>\$ _____</td> </tr> </table> Total and enter on Line 10.	a.	_____	\$ _____	\$0.00	\$
a.	_____	\$ _____				
11	Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 in Column A, and, if Column B is completed, add Lines 3 thru 10 in Column B. Enter the total(s).	\$4,649.00	\$			
12	Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.	\$ 4,649.00				

Part III. APPLICATION OF § 707(b)(7) EXCLUSION

13	Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result.	\$55,788.00
14	Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) a. Enter debtor's state of residence: <u>IL</u> b. Enter debtor's household size: <u>2</u>	\$56,545.00
15	Application of Section 707(b)(7). Check the applicable box and proceed as directed. <input checked="" type="checkbox"/> The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII. <input type="checkbox"/> The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement.	

Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15).

Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b)(2)

16	Enter the amount from Line 12.	\$
17	Marital adjustment. If you checked the box at Line 2.c, enter the amount of the income listed in Line 11, Column B that was NOT regularly contributed to the household expenses of the debtor or the debtor's dependents. If you did not check box at Line 2.c, enter zero.	\$
18	Current monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the result.	\$

Part V. CALCULATION OF DEDUCTIONS ALLOWED UNDER § 707(b)(2)

Subpart A: Deductions under Standards of the Internal Revenue Service (IRS)

19	National Standards: food, clothing, household supplies, personal care, and miscellaneous. Enter "Total" amount from IRS National Standards for Allowable Living Expenses for the applicable family size and income level. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)	\$
20A	Local Standards: housing and utilities; non-mortgage expenses. Enter the amount of the IRS Housing and Utilities Standards; non-mortgage expenses for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)	\$

20B	<p>Local Standards: housing and utilities; mortgage/rental expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; Mortgage/Rental Expense for the applicable county and family size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter on Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. Do not enter an amount less than zero.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">a.</td><td style="width: 65%;">IRS Housing and Utilities Standards; Mortgage/Rental Expense</td><td style="width: 30%;">\$</td></tr> <tr> <td style="text-align: center;">b.</td><td>Average Monthly Payment for any debts secured by home, as stated in Line 42.</td><td>\$</td></tr> <tr> <td style="text-align: center;">c.</td><td>Net mortgage/rental expense</td><td>Subtract Line b from Line a</td></tr> </table>	a.	IRS Housing and Utilities Standards; Mortgage/Rental Expense	\$	b.	Average Monthly Payment for any debts secured by home, as stated in Line 42.	\$	c.	Net mortgage/rental expense	Subtract Line b from Line a	\$
a.	IRS Housing and Utilities Standards; Mortgage/Rental Expense	\$									
b.	Average Monthly Payment for any debts secured by home, as stated in Line 42.	\$									
c.	Net mortgage/rental expense	Subtract Line b from Line a									
21	<p>Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:</p>	\$									
22	<p>Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.</p> <p>Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8. <input type="checkbox"/> 0 <input type="checkbox"/> 1 <input type="checkbox"/> 2 or more.</p> <p>Enter the amount from IRS Transportation Standards, Operating Costs & Public Transportation Costs for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)</p>	\$									
23	<p>Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)</p> <p><input type="checkbox"/> 1 <input type="checkbox"/> 2 or more.</p> <p>Enter, in Line a below, the amount of the IRS Transportation Standards, Ownership Costs, First Car (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 41; subtract Line b from Line a and enter the result in Line 23. Do not enter an amount less than zero.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">a.</td><td style="width: 65%;">IRS Transportation Standards, Ownership Costs, First Car</td><td style="width: 30%;">\$</td></tr> <tr> <td style="text-align: center;">b.</td><td>Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42.</td><td>\$</td></tr> <tr> <td style="text-align: center;">c.</td><td>Net ownership/lease expense for Vehicle 1</td><td>Subtract Line b from Line a</td></tr> </table>	a.	IRS Transportation Standards, Ownership Costs, First Car	\$	b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42.	\$	c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a	\$
a.	IRS Transportation Standards, Ownership Costs, First Car	\$									
b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42.	\$									
c.	Net ownership/lease expense for Vehicle 1	Subtract Line b from Line a									
24	<p>Local Standards: transportation ownership/lease expense; Vehicle 2. Complete this Line only if you checked the "2 or more" Box in Line 23.</p> <p>Enter, in Line a below, the amount of the IRS Transportation Standards, Ownership Costs, Second Car (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;">a.</td><td style="width: 65%;">IRS Transportation Standards, Ownership Costs, Second Car</td><td style="width: 30%;">\$</td></tr> <tr> <td style="text-align: center;">b.</td><td>Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42</td><td>\$</td></tr> <tr> <td style="text-align: center;">c.</td><td>Net ownership/lease expense for Vehicle 2</td><td>Subtract Line b from Line a</td></tr> </table>	a.	IRS Transportation Standards, Ownership Costs, Second Car	\$	b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42	\$	c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a	\$
a.	IRS Transportation Standards, Ownership Costs, Second Car	\$									
b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42	\$									
c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a									
25	<p>Other Necessary Expenses: taxes. Enter the total average monthly expense that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social security taxes, and Medicare taxes. Do not include real estate or sales taxes.</p>	\$									
26	<p>Other Necessary Expenses: mandatory payroll deductions. Enter the total average monthly payroll deductions that are required for your employment, such as mandatory retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as non-mandatory 401(k) contributions.</p>	\$									
27	<p>Other Necessary Expenses: life insurance. Enter average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.</p>	\$									

28	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to court order, such as spousal or child support payments. Do not include payments on past due support obligations included in Line 44.	\$												
29	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.	\$												
30	Other Necessary Expenses: childcare. Enter the average monthly amount that you actually expend on childcare. Do not include payments made for children's education.	\$												
31	Other Necessary Expenses: health care. Enter the average monthly amount that you actually expend on health care expenses that are not reimbursed by insurance or paid by a health savings account. Do not include payments for health insurance listed in Line 34.	\$												
32	Other Necessary Expenses: telecommunication services: Enter the average monthly expenses that you actually pay for cell phones, pagers, call waiting, caller identification, special long distance, or internet services necessary for the health and welfare of you or your dependents. Do not include any amount previously deducted.	\$												
33	Total Expenses Allowed under IRS Standards. Enter the total of Lines 19 through 32.	\$												
Subpart B: Additional Expense Deductions under § 707(b) Note: Do not include any expenses that you have listed in Lines 19 through 32														
34	Health Insurance, Disability Insurance and Health Savings Account Expenses. List the average monthly amounts that you actually expend in each of the following categories and enter the total. <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 10px;"> <tr> <td style="width: 5%; text-align: center;">a.</td><td style="width: 75%;">Health Insurance</td><td style="width: 20%; text-align: center;">\$</td></tr> <tr> <td style="text-align: center;">b.</td><td>Disability Insurance</td><td style="text-align: center;">\$</td></tr> <tr> <td style="text-align: center;">c.</td><td>Health Savings Account</td><td style="text-align: center;">\$</td></tr> <tr> <td></td><td>Total: Add Lines a, b and c</td><td style="text-align: center;">\$</td></tr> </table>	a.	Health Insurance	\$	b.	Disability Insurance	\$	c.	Health Savings Account	\$		Total: Add Lines a, b and c	\$	\$
a.	Health Insurance	\$												
b.	Disability Insurance	\$												
c.	Health Savings Account	\$												
	Total: Add Lines a, b and c	\$												
35	Continued contributions to the care of household or family members. Enter the actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. Do not include payments listed in Line 29.	\$												
36	Protection against family violence. Enter any average monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law.	\$												
37	Home energy costs in excess of the allowance specified by the IRS Local Standards. Enter the average monthly amount by which your home energy costs exceed the allowance in the IRS Local Standards for Housing and Utilities. You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary.	\$												
38	Education expenses for dependent children less than 18. Enter the average monthly expenses that you actually incur, not to exceed \$125 per child, in providing elementary and secondary education for your dependent children less than 18 years of age. You must provide your case trustee with documentation demonstrating that the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.	\$												
39	Additional food and clothing expense. Enter the average monthly amount by which your food and clothing expenses exceed the combined allowances for food and apparel in the IRS National Standards, not exceed five percent of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must provide your case trustee with documentation demonstrating that the additional amount claimed is reasonable and necessary.	\$												
40	Continued charitable contributions. Enter the amount that you will continue to contribute in the form of cash or financial instruments to a charitable organization as defined in 26 U.S.C. § 170(c)(1)-(2).	\$												
41	Total Additional Expense Deductions under § 707(b). Enter the total of Lines 34 through 40.	\$												

Subpart C: Deductions for Debt Payment

42	<p>Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, and state the Average Monthly Payment. The Average Monthly Payment is the total of all amounts contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. Mortgage debts should include payments of taxes and insurance required by the mortgage. If necessary, list additional entries on a separate page.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;"></th> <th style="width: 35%;">Name of Creditor</th> <th style="width: 35%;">Property Securing the Debt</th> <th style="width: 25%;">60-month Average Payment</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">a.</td> <td></td> <td></td> <td>\$</td> </tr> </tbody> </table> <p style="text-align: right;">Total: Add Lines a, b and c</p>		Name of Creditor	Property Securing the Debt	60-month Average Payment	a.			\$	\$	
	Name of Creditor	Property Securing the Debt	60-month Average Payment								
a.			\$								
43	<p>Past due payments on secured claims. If any of the debts listed in Line 42 are in default, and the property securing the debt is necessary for your support or the support of your dependents, you may include in your deductions 1/60th of the amount that you must pay the creditor as a result of the default (the "cure amount") in order to maintain possession of the property. List any such amounts in the following chart and enter the total. If necessary, list additional entries on a separate page.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;"></th> <th style="width: 35%;">Name of Creditor</th> <th style="width: 35%;">Property Securing the Debt in Default</th> <th style="width: 25%;">1/60th of the Cure Amount</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">a.</td> <td></td> <td></td> <td>\$</td> </tr> </tbody> </table> <p style="text-align: right;">Total: Add Lines a, b and c</p>		Name of Creditor	Property Securing the Debt in Default	1/60th of the Cure Amount	a.			\$	\$	
	Name of Creditor	Property Securing the Debt in Default	1/60th of the Cure Amount								
a.			\$								
44	<p>Payments on priority claims. Enter the total amount of all priority claims (including priority child support and alimony claims), divided by 60.</p>	\$									
45	<p>Chapter 13 administrative expenses. If you are eligible to file a case under Chapter 13, complete the following chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tbody> <tr> <td style="width: 5%; text-align: center;">a.</td> <td style="width: 60%;">Projected average monthly Chapter 13 plan payment.</td> <td style="width: 35%;">\$</td> </tr> <tr> <td style="text-align: center;">b.</td> <td>Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)</td> <td style="text-align: center;">x</td> </tr> <tr> <td style="text-align: center;">c.</td> <td>Average monthly administrative expense of Chapter 13 case</td> <td>Total: Multiply Lines a and b</td> </tr> </tbody> </table>	a.	Projected average monthly Chapter 13 plan payment.	\$	b.	Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)	x	c.	Average monthly administrative expense of Chapter 13 case	Total: Multiply Lines a and b	\$
a.	Projected average monthly Chapter 13 plan payment.	\$									
b.	Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)	x									
c.	Average monthly administrative expense of Chapter 13 case	Total: Multiply Lines a and b									
46	<p>Total Deductions for Debt Payment. Enter the total of Lines 42 through 45.</p>	\$									
Subpart D: Total Deductions Allowed under § 707(b)(2)											
47	<p>Total of all deductions allowed under § 707(b)(2). Enter the total of Lines 33, 41, and 46.</p>	\$									

Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION		
48	Enter the amount from Line 18 (Current monthly income for § 707(b)(2))	\$
49	Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2))	\$
50	Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the result	\$
51	60-month disposable income under § 707(b)(2). Multiply the amount in Line 50 by the number 60 and enter the result.	\$
52	<p>Initial presumption determination. Check the applicable box and proceed as directed.</p> <p><input type="checkbox"/> The amount on Line 51 is less than \$6,000. Check the “Presumption does not arise” box at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.</p> <p><input type="checkbox"/> The amount set forth on Line 51 is more than \$10,000. Check the “Presumption arises” box at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.</p> <p><input type="checkbox"/> The amount on Line 51 is at least \$6,000, but not more than \$10,000. Complete the remainder of Part VI (Lines 53 through).</p>	
53	Enter the amount of your total non-priority unsecured debt	\$
54	Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and enter the result.	\$
55	<p>Secondary presumption determination. Check the applicable box and proceed as directed.</p> <p><input type="checkbox"/> The amount on Line 51 is less than the amount on Line 54. Check the “Presumption does not arise” box at the top of page 1 of this statement, and complete the verification in Part VIII.</p> <p><input type="checkbox"/> The amount on Line 51 is equal to or greater than the amount on Line 54. Check the “Presumption arises” box at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.</p>	

Part VII. ADDITIONAL EXPENSE CLAIMS											
56	<p>Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect you average monthly expense for each item. Total the expenses.</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;"></th> <th style="width: 65%;">Expense Description</th> <th style="width: 30%;">Monthly Amount</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">a.</td> <td></td> <td style="text-align: center;">\$</td> </tr> <tr> <td></td> <td style="text-align: right;">Total: Add Lines a, b, and c</td> <td style="text-align: center;">\$</td> </tr> </tbody> </table>			Expense Description	Monthly Amount	a.		\$		Total: Add Lines a, b, and c	\$
	Expense Description	Monthly Amount									
a.		\$									
	Total: Add Lines a, b, and c	\$									

Part VIII: VERIFICATION	
57	<p>I declare under penalty of perjury that the information provided in this statement is true and correct. <i>(If this a joint case, both debtors must sign.)</i></p> <p>Date: <u>3/21/2008</u> Signature: <u>s/ Gladys Esther Paoli</u> <u>Gladys Esther Paoli, (Debtor)</u></p>

Income from all other sources (continued)

Future payments on secured claims (continued)

	Name of Creditor	Property Securing the Debt	60-month Average Payment
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Past due payments on secured claims (continued)

	Name of Creditor	Property Securing the Debt in Default	1/60th of the Cure Amount
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Other Expenses (continued)

	Expense Description	Monthly Amount
--	---------------------	----------------

B 203
(12/94)

UNITED STATES BANKRUPTCY COURT
Northern District of Illinois

In re: Gladys Esther Paoli
Debtor

Case No. _____
Chapter 7

**DISCLOSURE OF COMPENSATION OF ATTORNEY
FOR DEBTOR**

1. Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept	\$	<u>2,400.00</u>
Prior to the filing of this statement I have received	\$	<u>2,400.00</u>
Balance Due	\$	<u>0.00</u>

2. The source of compensation paid to me was:

☒ Debtor ☐ Other (specify)

3. The source of compensation to be paid to me is:

☐ Debtor ☐ Other (specify)

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a) Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b) Preparation and filing of any petition, schedules, statement of affairs, and plan which may be required;
- c) Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d) [Other provisions as needed]

None

6. By agreement with the debtor(s) the above disclosed fee does not include the following services:

adversary proceedings, appeals, contested matters

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Dated: 3/21/2008

James A. Kamide, Bar No. 6191608

James A. Kamide
Attorney for Debtor(s)

B 201 (04/09/06)

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS

**NOTICE TO INDIVIDUAL CONSUMER DEBTOR UNDER § 342(b)
OF THE BANKRUPTCY CODE**

In accordance with § 342(b) of the Bankruptcy Code, this notice: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case. You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$299 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$353)

1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$274 filing fee, \$39 administrative fee: Total fee \$313)

1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1039 filing fee, \$39 administrative fee: Total fee \$1078)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$239 filing fee, \$39 administrative fee: Total fee \$278)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

Certificate of Attorney

I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

James A. Kamide

Printed Name of Attorney

3/21/2008

Signature of Attorney

Date

Address:

**James A. Kamide
8114 W. Grand Avenue
River Grove, IL 60171**

708-453-5100

Certificate of the Debtor

I, the debtor, affirm that I have received and read this notice.

Gladys Esther Paoli

Printed Name of Debtor

Xs/ Gladys Esther Paoli

Gladys Esther Paoli

Signature of Debtor

3/21/2008

Date

Case No. (if known) _____

Dr. John Palen
5225 Old Orchard Rd, Suite 1
Skokie, IL 60077

American Express
P.O. Box 0001
Los Angeles, CA 90096-0001

Arnold H. Landis
77 W. Washington St., Ste 702
Chicago, IL 60602

Arnold H. Landis, Attorney
77 W. Washington St, Ste 702
Chicago, IL 60602

Beerman, Swerdlove, Woloshin, Barezky,
Becker, Genin & London
161 N. Clark St., Suite 2600
Chicago, IL 60601

James M. Quigley, Beerman lawfirm
Becker, Genin & London
161 N. Clark St., Suite 2600
Chicago, IL 60601

Tanya L. Akins, Beerman lawfirm
Becker, Genin & London
161 N. Clark St., Suite 2600
Chicago, IL 60601

Bonded Collection Corp
29 East Madison St, Ste 1850
Chicago, IL 60602

Capital One
P.O. Box 30285
Salt Lake City, UT 84130-0285

Document Page 56 of 64
Capital One
P.O. Box 60024
City of Industry, CA 91716-0024

Chicago Public Schools Benefit Plan
and Coghlan Kukankos, Attorneys
55 W. Wasker Dr., Ste 1210
Chicago, IL 60601

Circuit Court of Cook County
50 W. Washington St, Room 601
Chicago, IL 60602
CASE NO: 07 M1 170596

Citi Card
P.O. Box 688914
Des Moines, IA 50368-8914

CITI Cards
7920 NW 110th St
Kansas City, MO 64153

Cook County Public Guardian
69 W. Washington St., Suite 700
Chicago, IL 60602

David Blachek, CC Public Guardian
69 W. Washington St., Suite 700
Chicago, IL 60602

Margaret E. Curran, CC Public Guardian
69 W. Washington St., Suite 700
Chicago, IL 60602

Diane-Carole Reporting
200 N. Dearborn
Chicago, IL 60601

Donald Puchalski
111 W. Washington St., Ste 751
Chicago, IL 60602

Dr. David Finn
Associates in Human Development Couns
1500 Hicks Rd, Ste 300
Rolling Meadows, IL 60008

Dr. Louis J. Kraus
456 Woodland Rd.
Highland Park, IL 60035

Dr. Paula R. Markowitz
1341 W. Fullerton #101
Chicago, IL 60614

Elena M. Duarte, Attorney
5901 N. Cicero Ave
Chicago, IL 60646

GC Services Limited Partnership
6330 Gultton
Houston, TX

Gottlieb Memorial Hospital
701 W. North Avenue
Melrose Park, IL 60160

Gottlieb Memorial Hospital
P.O. Box 74867
Chicgo, IL

Harvey O. Smith
8642 Belden
River Grove, IL 60171

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Herbert A. Gliberman and Associates
19 S. LaSalle, Ste 600
Chicago, IL 60603

HSBC Cardmembers Services
P.O. Box 21055
Tulsa, OK 74121-1055

HSBC Direct Merchant Bank
P.O. Box 17313
Baltimore, MD 21297-1313

HSBC Orchard Bank Gold Mastercard
P.O. Box 17051
Baltimore, MD 21297-1051

John M. Kennelly & Associates
1010 Lake Street, Ste 605
Oak Park, IL 60301

Kamerlink, Stark, McCormack, Powers & Za
221 N. LaSalle St., Ste 1800
Chicago, IL 60601

Laura Roman
3532 W. Melrose St.
Chicago, IL 60618

Maria Jaffe & Associates
Eight S. Michigan Ave., Ste 3200
Chicago, IL 60603

Mary Beth Powres
221 N. LaSallle St., Ste 1800
Chicago, IL 60601

Document Page 59 of 64
Paul Bargiel, Attorney
100 W. Monroe, Ste 902
Chicago, IL 60603

Penny Slakowski, Attorney
5901 N. Cicero
Chicago, IL 60646

Portfolio Recovery Associates LLC
P.O. Box 12914
Norfolk, VA 23541

Rafael R. Paoli
6984 W. Diversey
Chicago, IL 60707

Redline Recovery Services, LLC
6201 Bonhomme St, Ste 100S
Houston, TX 77036

Karen J. Bowers
1 N. LaSalle St., Ste 3400
Chicago, IL 60602

Lizzette Cervantes
1 N. LaSalle St., Ste 3400
Chicago, IL 60602

Rinella & Rinella, Bernard Rinella
1 N. LaSalle St., Ste 3400
Chicago, IL 60602

Stewart Russell, Attorney
805 W. Touhy
Park Ridge, IL 60068

UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS

In re: Gladys Esther Paoli
Debtor

Case No. _____
Chapter 7

VERIFICATION OF CREDITOR MATRIX

The above named debtor(s), or debtor's attorney if applicable, do hereby certify under penalty of perjury that the attached Master Mailing List of creditors, consisting of **5** sheet(s) is complete, correct and consistent with the debtor's schedules pursuant to Local Bankruptcy Rules and I/we assume all responsibility for errors and omissions.

Dated: 3/21/2008

Signed: s/ Gladys Esther Paoli
Gladys Esther Paoli

Signed: _____
James A. Kamide
Attorney for Debtor(s)
Bar no.: **6191608**
James A. Kamide
8114 W. Grand Avenue
River Grove, IL 60171
Telephone No.: **708-453-5100**
Fax No.: **708-453-5248**
E-mail address: **jkamide@ameritech.net**

Form 6-Summ2
(10/05)

**United States Bankruptcy Court
Northern District of Illinois**

In re **Gladys Esther Paoli**
Debtor

Case No. _____
Chapter **7**

**STATISTICAL SUMMARY OF CERTAIN LIABILITIES (28 U.S.C. § 159)
[Individual Debtors Only]**

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E)	0.00
Student Loan Obligations (from Schedule F)	0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E.	0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	0.00
TOTAL	\$ 0.00

The foregoing information is for statistical purposes only under 28 U.S.C. § 159.

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS**

In re **Gladys Esther Paoli**

Case No.

Debtor.

Chapter **7**

STATEMENT OF MONTHLY NET INCOME

The undersigned certifies the following is the debtor's monthly income .

Income:	Debtor
Six months ago	\$ 0.00
Five months ago	\$ 0.00
Four months ago	\$ 0.00
Three months ago	\$ 0.00
Two months ago	\$ 0.00
Last month	\$ 0.00
Income from other sources	\$ 0.00
Total net income for six months preceding filing	\$ 0.00
Average Monthly Net Income	\$ 0.00

Attached are all payment advances received by the undersigned debtor prior to the petition date, I declare under penalty of perjury that I have read the foregoing statement and that it is true and correct to the best of my knowledge, information, and belief.

Dated: **3/21/2008**

s/ Gladys Esther Paoli

Gladys Esther Paoli

Debtor

IN RE

Gladys Esther Paoli

Debtor(s)

)
)
)
)
)

Chapter 7

Bankruptcy Case No.

DECLARATION REGARDING ELECTRONIC FILING

Signed by Debtor(s) or Corporate Representative

To Be Used When Filing over the Internet**PART I - DECLARATION OF PETITIONER**

Date:

3/20/08

A. To be completed in all cases.

I **Gladys Esther Paoli**, the undersigned debtor, corporate officer, partner, or member, hereby declare under penalty of perjury that the information I have given my attorney, including correct social security number and the information provided in the electronically filed petition, statements, schedules, and if applicable, application to pay filing fee in installments, is true and correct. I consent to my attorney sending the petition, statements, schedules, and this DECLARATION to the United States Bankruptcy Court. I understand that this DECLARATION must be filed with the Clerk in addition to the petition. I understand that failure to file this DECLARATION will cause this case to be dismissed pursuant to 11 U.S.C. sections 707(a) and 105.

B. To be checked and applicable only if the petitioner is an individual (or individuals) whose debts are primarily consumer debts and who has (or have) chosen to file under chapter 7.



I am aware that I may proceed under chapter 7, 11, 12, or 13 of Title 11 United States Code; I understand the relief available under each such chapter; I choose to proceed under chapter 7; and I request relief in accordance with chapter 7.

C. To be checked and applicable only if the petition is a corporation, partnership, or limited liability entity.



I declare under penalty of perjury that the information provided in this petition is true and correct and that I have been authorized to file this petition on behalf of the debtor. The debtor requests relief in accordance with the chapter specified in the petition.

Signature:

Gladys Esther Paoli
(Debtor or Corporate Officer, Partner or Member)

UNITED STATES BANKRUPTCY COURT
Northern District of Illinois

In re Gladys Esther Paoli

Case No.

Debtor.

Chapter 7

DEBTOR'S CERTIFICATION OF CREDIT COUNSELING

To whom it may concern, this letter is to verify that Gladys Esther Paoli has been or is receiving credit counseling with

Money Management International, Inc.
Consumer Credit Counseling Service of Greater Chicago
1515 N. Harlem, Ste 205
Oak Park, IL 60302
Certificate No. 01287-ILN-CC-002867641

Date

3-21-08

Gladys Esther Paoli

James A. Kende